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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

13

Application Number

10/612,496

Filing Date

July 1, 2003

First Named Inventor

Chad J. Kugler

Art Unit

3735

Examiner Name

Samuel G. Gilbert

Attorney Docket Number

000787-0006-101

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Submission of Formal Drawings (____ Replacement Sheets) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<div>Remarks</div> <p>The Director is hereby authorized to charge payment of any fees, or credit any overpayment, required in connection with this Amendment to Deposit Account No. 06-1075, Order No. 000787-0006-101. A duplicate copy of this Transmittal is enclosed herewith.</p>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Ropes & Gray LLP		
Signature			
Printed name	Robert R. Jackson		
Date	November 14, 2007	Reg. No.	26,183

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Typed or printed name	SARAH SCHLIE	Date	November 14, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENTS

Attorney Docket No. 000787-0006-101

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION

Applicants : Chad J. Kugler et al.
Application No. : 10/612,496 Confirmation No. : 3546
Filed : July 1, 2003
For : USE OF MAGNETIC IMPLANTS TO TREAT
BODY TISSUE STRUCTURES
Art Unit : 3735
Examiner : Samuel G. Gilbert

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

November 14, 2007

REPLY TO OFFICE ACTION

Sir:

Responsive to the Office action mailed August 20, 2007, applicants respectfully request consideration of the following amendments and remarks:

Amendments to the Claims begin on page 2 of this Reply.

Remarks begin on page 9 of this Reply.